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ABSTRACT

There are two types of accreditation in the United States, general and programmatic. The first is concerned with the quality of an entire institution, the second with the quality of a specific program. In recent years the number of specialized programmatic accreditation agencies has grown rapidly, and their functions have changed. They are no longer concerned merely with establishing minimum standards, and many, in fact, manage curricula, institutional policies, and procedures; prescribe admissions standards; specify staffing levels and job descriptions; and control facility use. Colleges have become increasingly concerned with the impact of program accreditation because of the financial costs associated with accreditation; the overlapping responsibilities of accreditation agencies and of colleges and other agencies; and increasing doubts as to whether accreditation improves educational quality. Colleges should seek solutions to these and other problems of accreditation by determining the appropriate role of accreditation in the school and the agencies to be associated with. Before becoming involved with an accreditation agency, colleges should determine if accreditation is necessary for graduates' employment, if it will lead to an improved program, what the costs will be, and if the school can live with the agency's requirements. If accreditation is deemed necessary, an accreditations officer should be appointed, and accreditation visits should be minimized. (HB)

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THE IMPACT OF NURSING AND ALLIED HEALTH PROFESSIONAL ORGANIZATIONS AND ACCREDITING AGENCIES ON COMMUNITY COLLEGE CURRICULA

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Paper presented at the 62nd Annual Convention of the American Association of Community and Junior Colleges, St. Louis, Mo., April 4-7, 1982.

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The Impact of Nursing and Allied Health Professional Organizations and Accrediting Agencies on Community College Curricula

by Robert R. Evans

There are two basic types of accreditation, general and programmatic. General, or institutional accreditation, is concerned with the equality of an entire institution. The Council on Postsecondary Accreditation and the U. S. Department of Education recognize six regional accrediting bodies: the Middle States, New England, North Central, Northwest, Southern, and Western Associations. Specialized accreditation, however, is concerned with the evaluation of a specific program within an institution. There are three categories of specialized programmatic accreditation. State licensing agencies or boards are accrediting bodies, for example, the various state boards of nursing. Certain professional organizations, for example, The American Chemical Association, also function to accredit specific programs. There are also state and national organizations that are mainly concerned with accrediting specific programs such as the National League for Nursing.

American education is unique in that the development and maintenance of its educational standards are not the resonsibility of a governmental agency, but are maintained through a peer evaluation system. Accreditation in the United States began in the early 1900's. The North Central association first published a list of regionally accredited colleges and universities in 1913. The American Medical Association, in 1905, initiated specialized accreditation of medical schools, as a result of the low quality of medical education in the United States at that time. The AMA was successful in their efforts and forced the closure of inferior medical schools. They also established the mechanism by which other professional organizations could become involved in the educational process.

Since the inception of accreditation nationally, associations dealing with institutional accreditation have grown from one to six. Specialized accrediting agencies, however, have grown from one to sixty-three, currently listed by the U.S. Department of Education. This list does not include the various state licensing agencies or boards such as state boards of nursing, cosmetology, barbers, and dental hygiene. If it is conservatively calculated that each state has two such licensing agencies or boards that affect community college curricula, one for nursing plus one additional, there are a total of 163 such groups nationally that are currently impacting community college curricula. Growth in the number of specialized programmatic accrediting agencies has been phenomenol in the last ten years. In 1971, there were 43 such bodies recognized by the U.S. Secretary of Education. Currently, there are 63 specialized accrediting agencies recognized by the U.S. Department of Education. This growth has been particularly rapid in agencies accrediting the allied health professions. The AMA alone lists 26 allied health occupations for which it serves as the accrediting body in collaboration with other allied health speciality organizations.

The majority of colleges do not challenge the right of accrediting agencies to establish minimum competency standards, designed to protect the public. Specialized accrediting agencies have, however, drifted away from simply establishing minimum competency levels. In many cases they have narrowed their focus to the point that they are attempting to manage not only the curricula but also institutional policies and procedures. In addition, some of them function to protect the professional interests of their members. The current Allied Health Education Directory[1], published by the American Medical Association, lists accreditation standards for the 26 allied health occupations for which it serves as the accrediting body. These published standards provide ample examples of the narrow focus of various accrediting bodies. In many cases these standards are so specific that they prescribe student admissions standards. For example, the Medical

Assistants Essentials and Guidelines state that "a medical examination, including a serology test, and a chest film or results of an approved tuberculin screening test, shall be part of the admissions record." Others specify staffing levels and job descriptions as seen in the section on Medical Laboratory Technicians, which states that "educational institutions conducting a medical laboratory technician program must establish the following functional positions and staff them with qualified individuals. Education coordinator:---duties of the Education Coordinator include participation in diadactic instruction, preparation of scheduled assignments in the clinical laboratory---admission policies---recruitment---. Program Director: the Program Director shall be responsible for the general supervision and coordination of the entire program including all instruction in the affiliated medical laboratories. Medical Director(s): the Medical Director must be a graduate in medicine---." Other accreditation criteria control the use of institutional facilities as exhibited by the Occupational Therapist Standards which state in part that, "a laboratory must be permanently assigned for the exclusive use of the occupational therapy program." In some instances, even instructional methodology is specified. The requirements for respiratory therapist accreditations state that "self instructional materials and appropriate audio-visual equipment shall be available and used whenever appropriate." The above examples are indicative of the fact that specialized accrediting agencies are requiring colleges to comply with a multitude of regulations that frequently go beyond establishing minimum competency levels for graduation program completion.

Why have colleges become so heavily involved with specialized accreditation? The colleges, at times, are their own worst enemies, and frequently institutions have entered into specialized programmatic accreditation for the wrong reasons. An institutional self-study submitted to the Northwest Association of Schools and Colleges stated that "although the _____ program is not currently accredited by _____agency, it is one of

the major departmental goals to become associated with this prestigious organization. No school in our state is accredited by them." This is a prime example of utilizing specialized accreditation to seek accolades from our peers.

There are three major reasons why colleges have become increasingly concerned with the impact of specialized programmatic accreditation. The financial cost associated with specialized accreditation is certainly one of the reasons. Olympic College just completed a self-study of its nursing programs for the Washington State Boards of Nursing at a cost of just over $12,000. The State Boards of Nursing Accreditation visit followed by ten months the institution's regional accreditation site visit, which found the College's nursing programs to be exemplary. Secondly, accrediting agencies are becoming more specialized and narrower in their focus and overlap responsibilities of other agencies and of the colleges themselves. The examples from the Allied Health Education Directory make this point. Lastly, colleges are beginning to seriously question whether specialized accreditation improves the quality of education.. The National League for Nursing data from the July, 1981, nursing licensure examinations compares student performance from associate degree NLN accredited programs with that of students from associate degree NLN non-accredited programs. In four out of the five examinations given, the associate degree students from non-accredited programs outscored those from accredited programs.

Within the last several years, institutions have begun to look for solutions to some of these problems. The resolution passed in June of 1977 by the Board of Directors of the American Association of Community and Junior Colleges is an excellent starting point for colleges concerned about specialized accreditation. A portion of that resolution reads as follows:

"We also recognize the need for specialized or programmatic accreditation in a limited number of fields when it is clearly in the public interest. However, we do not believe that postsecondary education or the general public are well served when institutions must divert time, attention, and resources away from serving students in order to respond to demands of a growing host of specialized organizations. AACJC is particularly concerned when, as is occasionally the case, the requirements of the specialized accrediting body would dictate institutional policies, practices and even forms of organization. We support accreditation as a time tested process for evaluating and assuring educational quality and not as a vehicle for asserting political demands or protecting professional interests."

What do the individual colleges need to do? They must first define the role of specialized accreditation at their own institutions and then determine those specialized agencies with which they wish to be associated. The decision to participate in specialized programmatic accreditation should be based primarily on the answers to the following questions.

1. Will specialized accreditation result in an improved program?

2. Is it necessary, not desirable, for the program graduates to obtain employment?

3. What is the cost associated with specialized accreditation?

4. Can we live with the basic requirements?

Remember that specialized accreditation in many ways is similar to quicksand; it is much easier to get into than out of.

If it is determined that specialized accreditation of programs is necessary, the institution should appoint an accreditation liaison officer. This individual should be responsible for all accreditation activities and must have a detailed knowledge of the specific requirements of the various accrediting agencies. The college should also insist that accreditation visits be minimized, normally not more frequently than once every five years, and coordinated with the site visitations of the regional accrediting body.

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